PART B - FEE(S) TRANSMITTAL

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							(Depositor's name)
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	APPLICATION NO. FILING DATE		FIRST NAMED INVEN	TOR		DRNEY DOCKET NO.	CONFIRMATION NO.
10/541,775	03/10/2006		Aarto Pareл		0	0696-0219PUSI 1488	
TITLE OF INVENTION	: BLEACHING OF CEI	LLULOSIC FIBRE MAT	ERIAL WITH PEROX	IIDE USING PO	OLYMERS A	S A STABILISER	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAI	D ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300		\$0	\$1810	06/01/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	CLASS			
CALANDRA, ANTHONY J 1791			162-078000	000			
 Change of corresponds CFR 1.363). 	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Birch, Stewart, 2 Kolasch & Birch, ELH						
Change of corresp Address form PTO/SE							
"Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	r type)			
PLEASE NOTE: Unl recordation as set forth	ess an assignee is ident i in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on th T a substitute for filing	ne patent. If an an assignment.	assignee is is	dentified below, the do	cument has been filed for
(A) NAME OF ASSIC	(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Kemira	Oyj		Helsin	ki, Fin	land		
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual	Corporate	ion or other private gro	up entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee sho							hown above)
Issue Fee	A check is enclose						
Publication Fee (N	lit card. Form PTO-2038 is attached. tereby authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number 22448 (enclose an extra copy of this form).						
✓ Advance Order - #	of Copies 4		overpayment, to D	reby authorized reposit Account	to charge the Number 22	required fee(s), any def 448 (enclose an	iciency, or credit any extra copy of this form).
5. Change in Entity Stat	us (from status indicates SMALL ENTITY state		b. Applicant is no	longer claiming	SMALL EN	l'ITY status. See 37 CF	R 1.27(g)(2).
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Authorized Signature	The	ms ff	30,330	Date _	May 2	27, 2010	
Typed or printed name		M. Murphy,		-		28,977	
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